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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Complete if Known

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) **1350**

Application Number **10/666,060**Filing Date **September 18, 2003**First Named Inventor **Robert C. Stolmeier**Examiner Name **Jes Pascua**Art Unit **3727**Attorney Docket No. **17263-62624 (15278)**RECEIVED
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MAR 28 2006

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account: Deposit Account number: **50-0410** Deposit Account Name: **Bingham McHale LLP**
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)
under 37 CFR 1.16 and 1.17

Credit any overpayments.

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1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	500	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$)

Fee (\$)

25

Each independent claim over 3 (including Reissues)

50

Multiple dependent claims

200

100

360

180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
23	-20 or HP	= 3	x 50 = 150

HP = highest number of total claims paid for, if greater than 20

Multiple Dependent Claims

Fee (\$)

Fee Paid (\$)

x =

Independent Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
3	-3 or HP	= 0	x =

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 C.F.R. 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
—	-100	= /50 = (round up to a whole number)	x	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fee Paid (\$)

Other (e.g., late filing surcharge): **Supplemental IDS**

\$180

3 Month Extension of Time

\$1020

SUBMITTED BY:

Signature

John V. Daniluck

Registration No.:

40,581

Telephone:

(317) 968-5529

Name (Print/Type): **John V. Daniluck**

Date:

28 March 2006

CERTIFICATE FACSIMILE

I hereby certify that this correspondence is being directed to the Commissioner of Patents via facsimile to the Examiner of record at 571-273-8300 on March 28, 2006.

Name (Print/Type): **John V. Daniluck**

Signature

John V. Daniluck

Date

28 March 2006

17263-62624 (15278)/JVD/104275

Bingham • McHale LLP

attorneys at law

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10 West Market Street
Indianapolis, Indiana 46204-4900

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To: Examiner Jes Pascua
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From: John V. Daniluck *John V. Daniluck*
Return Fax: 317-236-9907
Return Phone: 317-968-5529
User Number: 0231
Our Reference: 17263-62624 (15278)

28 March 2006

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ENCLOSED WITH THIS TRANSACTION:

- (1) Fee Transmittal - 1 page
- (2) Petition for Extension Time - 1 page
- (3) Response to Office Action - 11 pages
- (4) Supplemental IDS - cover letter - 2 pages
- (5) Supplement IDS citation list - 3 pages
- (6) DE 200 12 652 U1
- (7) DE 31 44702 A1
- (8) EP 0 834 454 B1